

From 2153644335

to 9,6103284771

at 11/5/2003 8:42 AM

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To official fax no. 703-746-4060

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION
USING AN APPLICATION DATA SHEET (37 CFR 1.76)****Title of Invention** Keypads for oblique viewing

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☐ The attached application, or
- ☒ Application No. 10/601,835 filed on June 23, 2003
- ☐ and amended by a Preliminary Amendment submitted concurrently herewith (if applicable):

I/we believe that I/we are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought.

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of this prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true; all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: Victor G. Feller

Signature: → Victor FellerCitizen of: United States
U.S.

Inventor two: Gerry J. Elman

Signature: Gerry J. ElmanCitizen of:
U.S.

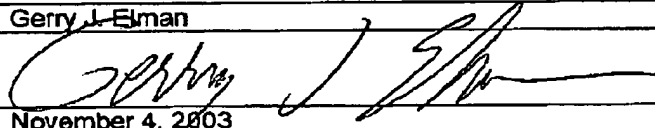
Inventor three:

Signature: _____

Citizen of: _____

To official facsimile 703-746-4060

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application No.	10/601,835
	Filed	23 June 2003
	First Named Inventor	Feller
	Art Unit	NA
	Examiner Name	NA
	Attorney Docket Number	PER1.003

I hereby appoint:				
<input checked="" type="checkbox"/>	Practitioners at Customer Number	003775	→	Place Customer Number Bar Code Label here
OR				
	Practitioner(s) named below:			
Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.				
Please change the correspondence address for the above-identified application to:				
	The above-mentioned Customer Number.			
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	Practitioners at Customer Number.		→	Place Customer Number Bar Code Label here
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	Firm or Individual Name			
	Address			
	Address			
	City	State	Zip	
	Country			
	Telephone	Fax		
I am the:				
<input checked="" type="checkbox"/>	Applicant/Inventor.			
	Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
SIGNATURE of Applicant or Assignee of Record				
Name	Gerry J. Elman			
Signature	→ 			
Date	→ November 4, 2003			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
	*Total of <u>1</u> forms are submitted.			